



REQUEST FOR INFORMATION # RFI UHAA 2015000017
Colorado Department of Health Care Policy and Financing
ACC Request for Information

Response to Inquiries

INQUIRY 1. **The RFP available online does not contain new contract language.**

RESPONSE 1. The Request for Proposal (RFP) document available online is the original RCCO RFP. New RFPs have not yet been released. The ACC Request for Information (RFI), released on October 21, 2014, is requesting information in advance of a new procurement.

INQUIRY 2. **How can responses be submitted?**

RESPONSE 2. When you are done writing responses, you can email it as an attachment to RCCORFP@state.co.us. If you prefer, you can also print the document and send it to the mailing address contained in the preamble / RFI instructions. If preferred, you may also send printed copies of your response to the address listed on Page 7.

INQUIRY 3. **Where can we find RFI responses?**

RESPONSE 3. The Request for Information was released to the public on October 21, 2014. RFI responses will be accepted through November 24, 2014. Answers to the RFI have not yet been aggregated. Responses may be published online in the future, after the conclusion of the response period.

INQUIRY 4. **Will responses to this survey lead to changes in services reimbursed, or is this based only on the current services provided to the Medicaid client?**

RESPONSE 4. The Department is open to all recommendations regarding billable services, reimbursement, and benefits and would be more likely to consider those recommendations that tie payment to value.

INQUIRY 5. Since client/beneficiary questions are intermingled with provider/policy questions; how will their responses be represented in the analysis?

RESPONSE 5. RFI analysis will be both qualitative and quantitative. A tracking mechanism has been established to allow RFI responses to be viewed either in aggregate or by "respondent type" as identified in the Basic Questions section.

INQUIRY 6. If suggestions are made to modify current services covered by the Medicaid benefits, will HCPF consider making those changes?

RESPONSE 6. Yes, the Department is open to considering benefit proposals that would improve health and decrease costs. However, modifications may require budget action or legislative authorization.

INQUIRY 7. Can we respond to only the Technology aspects of the RFI?

RESPONSE 7. Yes. Anyone wishing to respond to the RFI may answer as many, or as few, questions as he or she wants. All responses will be fully reviewed, irrespective of the number of questions answered.

INQUIRY 8. Will there be upcoming events where we can speak more in depth about Accountable Care Management Tools?

RESPONSE 8. The Department is interested in learning more about suggestions and technical specifications for potential care management tools. Clients, providers, advocates, and health information technology experts are all welcome to provide their input. We suggest using the opportunity of this RFI as a first step. Although scheduling is not yet complete, please keep in mind that there will also be further opportunities for stakeholder and vendor feedback on a number of subjects. These may also include opportunities for tech demos.

INQUIRY 9. Will there be an opportunity for the Technology specific questions to be expanded upon, to provide more in depth information?

RESPONSE 9. The Department encourages everyone to fully utilize the opportunity of this RFI process. If you wish to provide additional in-depth information on technology or health information technology, we encourage you to include it as a part of your RFI response, either through Question 90, or elsewhere in the document.

INQUIRY 10. Section 1.3.5, page 3: Please provide additional information about the planned Business Intelligence and Data Management system if available.

RESPONSE 10. The Business Intelligence and Data Management (BIDM) system is part of Colorado's Medicaid Management Innovation and Transformation (COMMIT) project. The three elements of COMMIT include: the Core Medicaid Management Information System (MMIS) and its Supporting Services, the Pharmacy Benefits Management System (PBMS), and the BIDM. The BIDM solicitation is currently under evaluation by the Department.

The BIDM is expected to contain: Business Intelligence and Analytics (similar to current decision-support systems and the SDAC's analytics engine), Extract, Transform and Load (ETL) Tools, Enterprise Data Modeling, the provision of a Data Warehouse, Online Analytical Processing, Geospatial Analytics capacity, a Statistical Analytics package, Program Integrity and Audit Tracking functionality, Data Mining, Rate Setting, and Integration of External Data, among other functionality.

For more information, please consult the [draft BIDM RFP, which is available here](#).

INQUIRY 11. Section 1.3.6.2, page 4: Please provide additional information, if available, about the availability of client-level data claims or encounter data for medical, behavioral health, pharmacy, and home-and-community-based services to facilitate care coordination activities.

RESPONSE 11. Client-level claims or encounter data is available through the Medicaid Management Information System (MMIS). This data is available across all of the domains listed above. For many reasons including timeliness, claims and encounter data alone are often of limited utility for the purpose of care coordination.

- INQUIRY 12.** **Section 1.3.7, page 4: Currently, Regional Care [Collaborative] Organizations (RCCOs) are not at risk, while Behavioral Health Organizations (BHOs) are. Is the Department considering using a single reimbursement model for both types of organizations?**
- RESPONSE 12.** The Department is considering all options that will promote behavioral health integration. As a part of this process, the Department is evaluating various financial and administrative arrangements. Responses to this RFI will help to inform the range of reimbursement models that will be considered. If you have suggestions, please consider answering Question 62 which addresses this subject.
- INQUIRY 13.** **Section 1.4, page 4: Will all client populations be assigned to a RCCO/BHO, including traditional Medicaid, dual eligible Medicare/Medicaid beneficiaries, and Medicaid expansion clients?**
- RESPONSE 13.** Yes, the Department is committed to include all full-benefit Medicaid enrollees. The ACC Program is voluntary, so Medicaid clients can choose to join, or opt out upon being enrolled. If you have recommendations regarding the inclusion or exclusion of specific populations from the ACC Program, please describe this in your response.
- INQUIRY 14.** **Section 1.4.1, page 4: Could the Department please share your recognition of strengths and lessons learned from the current program approach?**
- RESPONSE 14.** This Request for Information is part of the Department's assessment of the successes, strengths, and lessons learned from the first iteration of the ACC. The Department is soliciting your and others' perspective and insight into both the current iteration of the program and what should be changed in the future.
- INQUIRY 15.** **Response Worksheet, page 8 (and following): Some response items include fields that can accept text; however, the “check boxes” are not interactive, and other pages do not allow entry into the document, e.g., page 9. To facilitate responses, could the Department provide a document that allows entry into each of the response items?**
- RESPONSE 15.** All check boxes contained in the RFI document can be checked and unchecked by clicking in the center of the checkbox. To do this, please use Microsoft Word or a program with similar compatibility. Please ensure that you are opening the Word document, rather than a PDF version of the RFI.

PDF versions are intended to be printed and cannot be edited. If you continue to have difficulty editing the document, please feel welcome to contact the Department at 303-866-5351 or RCCORFP@state.co.us. You can also obtain the editable document from [the ACC RFP webpage, here](#), then clicking "About the RFI."

INQUIRY 16. **Response Worksheet, page 11: If respondents have additional information for "Other" should they submit an additional page?**

RESPONSE 16. If your response is not formatted correctly in the "other" box, you may insert your response above the next question (in this case, above question 12). If you have difficulty with this approach, please submit another page.

INQUIRY 17. **Item 24, page 18: In developing areas for common approaches across RCCOs, does the Department see a role for the Statewide Data Analytics Contractor (SDAC) and/or the Utilization Management (UM) Contractor. For example, would the SDAC or UM Contractor work directly for the RCCOs or BHOs to support health information technology and/or care coordination?**

RESPONSE 17. Yes, the Department is soliciting input from all partners on the management of vendors and of future processes that can improve care and maximize the efficiency of existing contracts.

INQUIRY 18. **What is the current PMPM for Regional Care Collaborative Organizations (RCCOs)?**

RESPONSE 18. The current base per-member per-month (PMPM) payment to RCCOs varies from \$8.43 – \$9.00. Additionally, this base payment can vary based on the number of clients who are unattributed for greater than six months. RCCOs can also earn up to an additional \$1 PMPM on their performance on Key Performance Indicators.

INQUIRY 19. **I work for a state agency that interacts with Medicaid but I have also been served by the ACC in the past. May I respond to the RFI?**

RESPONSE 19. Yes. However, please clearly identify this in your response. Pursuant to 3.2.2, the Department will de-identify your response unless you request otherwise.

INQUIRY 20. **How can I become a Medicaid provider? Where can we find a current provider list?**

RESPONSE 20. You can visit [the provider information page](#) to learn how to become a Medicaid provider. More information is also available via the Xerox State Healthcare Provider Services desk, 1-800-237-0757. [A Medicaid provider lookup is available here.](#)

INQUIRY 21. **Section 1.4 VISION FOR THE NEXT RCCO RFP does not address the start dates for future contracts. When does Health Care Policy and Financing expect new contracts to be effective? How many clients will be in the ACC at that point?**

RESPONSE 21. The Department has not made a decision on when the RCCO RFP will be released or when new contracts will be effective. It is anticipated that ACC enrollment will continue to grow. Official projections for the number of people to be served by the ACC Program will be available in the Department's FY 2015-16 Performance Plan, which, once released, [will be published to the Department's Performance page.](#)

INQUIRY 22. **I have been a consumer and an advocate (for a family member), may I list both in the Basic Questions section?**

RESPONSE 22. Yes. You may check as many boxes as are applicable in the Basic Questions section. Unless requested otherwise, Pursuant to 3.2.2, the Department will de-identify your response.

INQUIRY 23. **Please elaborate on your definition of "the current benefit structure" on question 31? What is the current benefit structure?**

RESPONSE 23. Colorado Medicaid delivers a variety of benefits through Fee-For-Service and Managed Care. Depending on a variety of factors, either or both of these structures are utilized for benefit delivery. Please feel welcome to consider all services and benefits when answering this question. [To learn about the benefit structure in the ACC, you can visit the Department's Benefits and Services overview page, here.](#)

INQUIRY 24. **Page 22, Question 44(g), "What role should counties play in the next iteration of the ACC Program?" Can you clarify this question so our members know how to respond more appropriately?**

RESPONSE 24. Today, counties, and county agencies like local public health agencies and departments of human services, frequently interact with RCCOs and the ACC Program. The question seeks to understand what kinds of collaboration between counties and the ACC Program will make sense in the future as we move towards more whole-person care and support.

INQUIRY 25. **Page 19, Question 32, "Should there be multiple RCCOs per region?" – Can you clarify who HCPF would deem as the entity that chose which RCCO to be part of? Would that mean the provider or patient/client chooses?**

RESPONSE 25. Yes, the Department would be open to consider various arrangements around RCCO selection. The Department is open to suggestion as to the specifics of how this general recommendation would work.